

75
45
121

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

10817312

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2	1		1			
3	2		2			
4	2		0			
5	2		2			
6	2		2			
7	2		2			
8	2		2			
9	2		2			
10	2		2			
11	2		2			
12	2		2			
13	2		2			
14	2		3			
15	2		2			
16	2		2			
17	2		2			
18	2		2			
19	2		2			
20	2		2			
21	2		2			
22	2		2			
23	2		2			
24	2		2			
25	2		2			
26	2		2			
27	2		2			
28	2		2			
29	2		2			
30	2		2			
31	2		2			
32	1		1			
33	1					
34	2		1			
35	2		1			
36	2		1			
37	2		1			
38	2		1			
39	2		1			
40	2		1			
41	2		1			
42	2		1			
43	2		1			
44	2		1			
45	2		1			
46	2		1			
47	2		1			
48	2		1			
49	1					
50	2		1			

TOTAL IND.



TOTAL DEP.

TOTAL CLAIMS

TOTAL IND.	5	1	0	1
TOTAL DEP.	121	121	22	22
TOTAL CLAIMS	1126	1126	22	22